### STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES BIP WORK PLAN

## GENERAL NWD/SEP STRUCTURE

1. All individuals receive standardized information and experience the same eligibility determination and enrollment processes.

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
1.1. Develop standardized informational materials that	6/30/13	Dawn	In Progress	Informational materials
NWD/SEPs provide to individuals		Lambert	_	
1.2. Train all participating agencies/staff on eligibility	6/30/14	Dawn	Not Started	Training agenda and schedule
determination and enrollment processes		Lambert		

2. A single eligibility coordinator, "case management system," or otherwise coordinated process guides the individual through the entire functional and financial eligibility determination process. Functional and financial assessment data or results are accessible to NWD/SEP staff so that eligibility determination and access to services can occur in a timely fashion. (The timing below corresponds to a system with an automated Level I screen, an automated Level II assessment and an automated case management system. NWD/SEP systems based on paper processes should require less time to put into place.)

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
2.1. Design system (initial overview)	6/30/13	Dawn Lambert	Completed	Description of the system
2.2. Design system (final detailed design)	12/31/13	Karen Law	In progress	Detailed technical specifications of system
2.3. Select vendor (if automated)	3/31/14	Dawn Lambert	Completed	Vendor name and qualifications
2.4. Implement and test system	12/31/14	Karen Law	Not Started	Description of pilot roll-out
2.5. System goes live	6/30/15	Dawn Lambert	Not Started	Memo indicating system is fully operational
2.6. System updates	Semiannual after 6/30/15	Karen Law	Not Started	Description of successes and challenges

## NWD/SEP

3. State has a network of NWD/SEPs and an Operating Agency; the Medicaid Agency is the Oversight Agency.

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
3.1. Identify the Operating Agency	4/30/13	Dawn Lambert	Completed	Name of Operating Agency
3.2. Identify the NWD/SEPs	4/30/13	Karen Law	Completed	List of NWD/SEP entities and locations
3.3. Develop and implement a Memorandum of Understanding (MOU) across agencies	9/30/13	Karen Law	In progress	Signed MOU

4. NWD/SEPs have access points where individuals can inquire about community LTSS and receive comprehensive information, eligibility determinations, community LTSS program options counseling, and enrollment assistance.

Major Objective / Interim Tasks	Suggested Due Date (from time	Lead	Status of	Deliverables
	of Work Plan submission)*	Person	Task	
4.1. Identify service shed coverage of all NWD/SEPs	6/30/13	Dawn	In Progress	Percentage of State population
		Lambert		covered by NWD/SEPs
4.2. Ensure NWD/SEPs are accessible to older adults and	12/31/13	Dawn	In Progress	Description of NWD/SEP features that
individuals with disabilities		Lambert		promote accessibility

### WEBSITE

5. The NWD/SEP system includes an informative community LTSS website; Website lists 1-800 number for NWD/SEP system.

Major Objective / Interim Tasks	Suggested Due Date (from time	Lead	Status of	Deliverables
	of Work Plan submission)*	Person	Task	
5.1. Identify or develop URL	6/30/13	Karen Law	Completed	URL
5.2. Develop and incorporate content	9/30/13	Karen Law	In Progress	Working URL with content completed
5.3. Incorporate the Level I screen into the website	9/30/14	Karen Law	Not Started	Working URL of Level I screen and
(recommended, not required)				instructions for completion

## 1-800 NUMBER

6. Single 1-800 number where individuals can receive information about community LTSS options in the State, request additional information, and schedule appointments at local NWD/SEPs for assessments.

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
6.1. Contract 1-800 number service	12/31/13	Dawn	In	Phone number
		Lambert	Progress	
6.2. Train staff on answering phones, providing	9/30/14	Dawn	Not	Training materials
information, and conducting the Level I screen		Lambert	Started	

### **ADVERTISING**

7. State advertises the NWD/SEP system to help establish it as the "go to system" for community LTSS

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
7.1. Develop advertising plan	9/30/13	Dawn Lambert	In progress	Advertising plan
7.2. Implement advertising plan	12/31/13	Dawn Lambert	In Progress	Materials associated with advertising plan

## CSA/CDS

8. A CSA, which supports the purposes of determining eligibility, identifying support needs, and informing service planning, is used across the State and across a given population. The assessment is completed in person, with the assistance of a qualified professional. The CSA must capture the CDS (a Core Data Set of required domains and topics).

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
8.1. Develop questions for the Level I screen	9/30/13	Karen Law	In progress	Level I screening questions
8.2. Fill out CDS crosswalk (see Appendix H in the Manual) to determine if your State's current assessments include required domains and topics	1/31/14	Karen Law	In Progress	Completed crosswalk(s)
8.3. Incorporate additional domains and topics if necessary (stakeholder involvement is highly recommended)	9/30/13	Dawn Lambert	In progress	Final Level II assessment(s); notes from meetings involving stakeholder input
8.4. Train staff members at NWD/SEPs to coordinate the CSA	3/31/14	Dawn Lambert	Not Started	Training materials
8.5. Identify qualified personnel to conduct the CSA	3/31/14	Dawn Lambert	Started	List of entities contracted to conduct the various components of the CSA and qualifications required
8.6. Regular updates	Semiannual after 3/31/14	Karen Law	Not Started	Description of success and challenges

## CONFLICT-FREE CASE MANAGEMENT

9. States must establish conflict of interest standards for the Level I screen, the Level II assessment, and plan of care processes. An individual's plan of care must be created independently from the availability of funding to provide services.

Major Objective / Interim Tasks	Suggested Due Date (from time	Lead	Status of	Deliverables
	of Work Plan submission)*	Person	Task	
9.1. Describe current case management system, including conflict-free policies and areas of potential conflict	3/31/13	Dawn Lambert	Completed	Strengths and weaknesses of existing case management system
9.2. Establish protocol for removing conflict of interest	12/31/13	Dawn Lambert	Not Started	Protocol for conflict removal; if conflict cannot be removed entirely, explain why and describe mitigation strategies

## DATA COLLECTION AND REPORTING

10. States must report service, outcome, and quality measure data to CMS in an accurate and timely manner.

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
10.1. Identify data collection protocol for service data	6/30/13	Dawn	Completed	Measures, data collection instruments,
		Lambert		and data collection protocol
10.2. Identify data collection protocol for quality data	6/30/13	Dawn	Completed	Measures, data collection instruments,
		Lambert		and data collection protocol
10.3. Identify data collection protocol for <i>outcome</i>	6/30/13	Dawn	Completed	Measures, data collection instruments,
measures		Lambert		and data collection protocol
10.4. Report updates to data collection protocol and	Semiannual** after 6/30/13	Karen	Not Started	Document describing when data were
instances of service data collection		Law		collected during previous 6-month
				period, plus updates to protocol
10.5. Report updates to data collection protocol and	Semiannual** after 6/30/13	Karen	Not Started	Document describing when data were
instances of quality data collection		Law		collected during previous 6-month
				period, plus updates to protocol
10.6. Report updates to data collection protocol and	Semiannual** after 6/30/13	Karen	Not Started	Document describing when data were
instances of outcomes measures collection		Law		collected during previous 6-month
				period plus updates to protocol

<sup>\*\*</sup> If States do not submit satisfactory information regarding data collection protocol, they will be required to submit this information on a quarterly basis.

## SUSTAINABILITY

11. States should identify funding sources that will allow them to build and maintain the required structural changes.

Major Objective / Interim Tasks	Suggested Due Date (from time	Lead	Status of	Deliverables
	of Work Plan submission)*	Person	Task	
11.1. Identify funding sources to implement the structural	6/30/13	Dawn	Completed	Description of funding sources
changes		Lambert		
11.2. Develop sustainability plan	6/30/14	Dawn	In progress	Funding sources and estimated annual
		Lambert		budget necessary to maintain
				structural changes after award period
				ends

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
11.3. Describe the planned usage for the enhanced funding			In progress	Description of how the State will use the enhanced funding earned through the program. Detail how these planned expenditures: 1. Increase offerings of or access to non-institutional long-term services and supports; 2. Are for the benefit of Medicaid recipients; and 3. Are not a prohibited use of Medicaid funding.

## **EXCHANGE IT COORDINATION**

12. States must make an effort to coordinate their NWD/SEP system with the Health Information Exchange IT system.

Major Objective / Interim Tasks	Suggested Due Date (from time of Work Plan submission)*	Lead Person	Status of Task	Deliverables
12.1. Describe plans to coordinate the NWD/SEP system with the Health Information Exchange IT system	6/30/13	Dawn Lambert	In Progress	Description of plan of coordination
12.2. Provide updates on coordination, including the technological infrastructure	Semiannually starting 6/30/13	Karen Law	Not Started	Description of coordination efforts

#### DESCRIPTIONS OF DELIVERABLES AND COMPANION TEXT

## 1. All individuals receive standardized information and experience the same eligibility determination and enrollment processes.

1.1. Develop standardized informational materials that NWD/SEPs provide to individuals: Informational materials can include pamphlets, summaries of programs and related eligibility criteria, and case worker scripts. States may already have developed these materials and distributed them to individuals seeking community LTSS.

Describe the current status of this task:

This task is in progress. CT has already developed a pamphlet for Money Follows the Person (MFP) and distributed to MFP transition coordinator agencies for delivery to nursing facilities and interested consumers. Money Follows the Person transition coordinator contractors include the Area Agencies on Aging and Centers for Independent Living. CT has also published summaries of programs and related eligibility criteria.

The hub of Connecticut's NWD is envisioned as a coordinated virtual network with a foundation built on 2 primary websites, ConneCT and MyPlaceCT.

Status of ConneCT

The purpose of ConneCT is to improve access to programs authorized by the Department of Social Services (DSS) ConneCT. Launched in April 2013, ConneCT serves as the 'front door' for DSS services and supports. To date an electronic and printable question and answer document has been produced providing people with general information about applying for benefits.

https://connect.ct.gov/access/accessController?id=0.3655088568744237

Status of MyPlaceCT

The purpose of MyPlaceCT is to guide persons who need basic information and assistance navigating the LTSS system. To date, most of the progress regarding LTSS standardized information has been incorporated into the MyPlaceCT site scheduled to launch on June 27. Electronic pamphlets, brochures, and video will be located on the site and will also be available in print. Print and video is scheduled to launch with the site on June 27.

Describe experienced or anticipated challenges to completing this task:

Challenges will include simplifying eligibility criteria enough to be easily understood by the general public and included in a pamphlet.

Describe the State's plan to address the challenges described above: Connecticut's efforts are supported by a diverse workgroup. Input from the workgroup regarding design and development of the NWD including material development is the key to success.

1.2. Train all participating agencies/staff on eligibility determination and enrollment processes: All staff should be trained on these processes by the time the NWD/SEP system is implemented for testing (18 months after date of Work Plan submission). This timing corresponds to an automated NWD/SEP system; the implementation of a paper-based system should require less time. As a related deliverable, States should submit the training documents used by NWD/SEP staff to follow the NWD/SEP processes, in addition to the training agenda. To be effective, documents should include flow diagrams and clear guidelines for each type of NWD/SEP staff member.

Describe the current status of this task:

CT has not started to train staff on eligibility determination and enrollment processes.

Describe experienced or anticipated challenges to completing this task:

CT anticipates a challenge because the different entities and staff will have a large variance in knowledge of DSS program eligibility and computer ability.

Describe the State's plan to address the challenges described above:

CT will develop a range of trainings which will include basic information as well as more detailed training. Staff who need more training on any level will be offered additional training.

- 2. A single eligibility coordinator, "case management system," or otherwise coordinated process guides the individual through the entire functional and financial eligibility determination process.
  - 2.1. Design system (initial overview): The State should submit with the Work Plan a general description of the NWD/SEP system, including the major actors (i.e., Operating Agency, NWD/SEPs), overview of processes (e.g., flow diagram), and the level of automation expected within the system. For example, States should indicate whether they plan on using an online Level I screen and/or an automated Level II assessment that feeds into a central database, accessible to all

NWD/SEPs. Describe the current status of this task:

REQUIRED: Initial overview is complete. See Appendix A1: Design system-Initial Overview and A2: Design system-Initial Overview Chart. Describe experienced or anticipated challenges to completing this task:

N/A

Describe the State's plan to address the challenges described above:

N/A

2.2. Design system (final detailed design): This second task involves a much more detailed design structure of the NWD/SEP system. If the State plans to contract a vendor to build an automated system, the deliverable associated with this task could be a Request for Proposals (RFP) disseminated to potential vendors. The RFP should include the data flow, highlighting which entity(ies) will house the data, data transfer mechanisms, levels of user access, and data security measures. If the NWD/SEP system is paper-based, the description should include how information will be transferred to different participating entities in a timely manner (e.g. phone, fax) and how non-electronic data will be stored and retrieved securely.

Describe the current status of this task:

The status of this task is in progress.

#### ConneCT:

CT has already begun work on several different aspects of the total system, which includes online access to Medicaid financial and functional assessments. In April 2013, CT started the roll out of a new financial eligibility processing system called ConneCT. ConneCT will interface with CT's health exchange system, which is also in progress.

The advanced planning document for 'MyAccount' function providing electronic access to personal financial and functional updates was approved in February 2013. Under the Advanced Planning Document for the Integrated Eligibility System (Appendix B: "INTEGRATED ELIGIBILITY PROJECT – IMPLEMENTATION ADVANCE PLANNING DOCUMENT"), Connecticut plans to "Provide a 'no wrong door' to all DSS programs. The platform will be extensible so that access to other non-DSS programs could be included in the future." Additionally, there are plans to simplify eligibility rules, automate eligibility determination, and provide integrated online educational materials.

MyPlaceCT

See reference 1.1

Describe experienced or anticipated challenges to completing this task:

An anticipated challenge is coordination among multiple entities working on the various parts and different phases of the entire system. The level of automation is expected to be very high, which will pose a challenge for integrating complex systems. Additional challenges are anticipated with data sharing across Departments and interfaces with the various systems.

Connecticut expects to use an online Level I screen and an automated Level II assessment that feeds into a central database. Determining the most appropriate system for the database may also be a challenge.

Describe the State's plan to address the challenges described above:

We will maintain close contact with each identified agency responsible for the different aspects of the system to ensure that we have a voice in the development. We will work with stakeholders and the MFP Steering Committee to ensure that the needs of individuals who need long term supports and services are included.

We will schedule meetings up front, prior to the system design to make sure that all agencies can bring potential problems to the table. If the problems are identified early, they can be more easily resolved. All the waiver agencies and entities will be involved, including ADRCs, Department of Social Services, the Department of Developmental Services, the Department of Mental Health and Addiction Services, Local Mental Health Authorities, Advanced Behavioral Health, and the Access Agencies contracted by DSS.

An advanced planning document for data sharing was submitted to CMS in February 2013.

The State will contract with experienced companies and will complete the project in phases. Please see Appendix B: "INTEGRATED ELIGIBILITY PROJECT - IMPLEMENTATION ADVANCE PLANNING DOCUMENT."

2.3. Select vendor (if automated): Once a vendor is selected to build or enhance the NWD/SEP system, the State should submit a memo indicating the vendor name and qualifications (i.e., reason for selection).

Describe the current status of this task:

Completed.

ConneCT - Vendor selection: An RFP was developed by the Department and a vendor (Deloitte) was selected for ConneCT design and development. Vendor qualifications are attached in Appendix C: Deloitte Summary of Qualifications. An Advanced Planning Document Update are in Appendix D: MODERNIZATION of CLIENT SERVICE DELIVERY ConneCT PROJECT – ANNUAL IMPLEMENATION ADVANCE PLANNING DOCUMENT UPDATE - (IAPDU).

MyPlaceCT – Vendor selection: A qualified vendor (Mintz and Hoke) who also works on the HIX was selected for the web development and advertising. See Appendix E for Mintz and Hoke's qualifications.

Describe ex	perienced	or anticip	ated chall	enges to	complet	ing this	task:

N/A

Describe the State's plan to address the challenges described above:

N/A

2.4.	<i>Implement and test system:</i> We expect many States will gradually roll out the NWD/SEP system, incorporating NWD/SEPs one at a time or in groups. This will allow States to test processes, identify lessons learned, and make improvements. This task requires a description of the rollout plan, including which entities will implement the system when, and protocols for evaluating processes and incorporating lessons learned.
	Describe the current status of this task:  This task has not been started.
	Describe experienced or anticipated challenges to completing this task: The various NWD/SEP entities will have very different technology capabilities and resources.
	Describe the State's plan to address the challenges described above:
	Early identification of the needed technology and systems will allow the entities to prepare. Using a phased in roll-out plan will help identify issues and resolve problems.
2.5.	System goes live: Once the system is live or fully operational, States should submit a memo to CMS indicating that it is fully operational and describe any major system changes implemented since the detailed design.
	Describe the current status of this task:
	This task has not been started.
	Describe experienced or anticipated challenges to completing this task:
	No major challenges are expected.
	Describe the State's plan to address the challenges described above:
2.6.	System updates: After the system goes live, States should submit a brief semiannual report describing the successes and challenges associated with the system.
	Describe the current status of this task:
	This task has not been started.
	Describe experienced or anticipated challenges to completing this task:
	No challenges are expected.
	Describe the State's plan to address the challenges described above:

- 3. State has a network of NWD/SEPs and an Operating Agency; the Medicaid Agency is the Oversight Agency.
  - 3.1. *Identify the Operating Agency:* The name of this agency should be included in the initial description of the NWD/SEP system.

Describe the current status of this task:

REQUIRED: This task is completed. The Division of Health Services under the Department of Social Services maintains oversight over the NWD. Co-operating agencies are as follows:

- 1. Oversight/Co-operating Agency Department of Social Services (DSS), Division of Health Services (DHS)
- 2. Co-operating Agency State Department on Aging
- 3. Co-operating Agency DSS, Bureau of Integrated Services, Social Work Services
- 4. Co-operating Agency Department of Developmental Services
- 5. Co-operating Agency Department of Mental Health and Addiction Service
- 6. Co-operating Agency Department of Disability Services
- 7. Co-operation Agency Department of Rehabilitation Services

Describe experienced or anticipated challenges to completing this task:

No challenges were experienced.

Describe the State's plan to address the challenges described above:

3.2. *Identify the NWD/SEPs:* The names of the entities and their locations should be included in the initial description of the NWD/SEP system.

Describe the current status of this task:

REQUIRED: The initial identification of NWD/SEP entities has been completed. We have identified the Aging and Disability Resource Centers (ADRCs) in Connecticut. Connecticut's ADRCs are known as "Community Choices." See Appendix F: Identify the NWD-SEPs. CT expects to add many more entities (senior centers, town social services, libraries, etc.), until there is at least one entity in each of CT's towns.

Describe experienced or anticipated challenges to completing this task:

CT has 169 towns and multiple communities within many of the towns. Each town is set up differently with different services and it may be difficult to find all the players who may be in the best situation and willing to work on NWD/SEP.

Describe the State's plan to address the challenges described above:

CT plans on working with the Connecticut Council for Philanthropy, senior centers and others whose members already have many community and town contacts. Close and early contact with the communities and towns will help alleviate problems and provide time to resolve potential issues.

3.3. Develop and implement a Memorandum of Understanding (MOU) across agencies, including the State Medicaid Agency and the Operating Agency: Given that many agencies will be involved in the NWD/SEP system, it is essential that each agency has a clear role and is on board with completing its responsibilities. MOUs are a key resource in helping define tasks and develop or solidify support. An example MOU is located in Appendix F in the Manual.

Describe the current status of this task:

In progress: Although not a specific NWD/SEP memorandum, an MOU was developed with the State Department on Aging (SDA). This MOU gives the ADRCs responsibility for assistance with completing Medicaid LTC application to support qualified clients including timely collection and submission of all relevant Medicaid application documents. The MOU also gives the SDA responsibility for implementation of the Common Comprehensive Assessment across all programs administered by SDA. (Attached Appendix G). Other MOUs with ADRCs and other entities will be developed over the next 3 months and ongoing.

Describe experienced or anticipated challenges to completing this task:

CT anticipates a challenge coming to consensus on roles and responsibilities among the many different agencies and entities involved.

Describe the State's plan to address the challenges described above:

Getting all the agencies together for intensive retreats will be a way to help address the problem. This method has worked here. CT will also develop MOUs, working with DSS Contracts staff to make sure the language is clear.

- 4. NWD/SEPs have access points where individuals can inquire about community LTSS and receive comprehensive information, eligibility determinations, community LTSS program options counseling, and enrollment assistance.
  - 4.1. Identify service shed coverage of all NWD/SEPs: As previously noted, a NWD/SEP's service shed covers all residents within a certain distance. Ideally, the combined service sheds of all NWD/SEPs should cover the State's entire population. Because this is not always feasible, States

should submit the percentage of the State's population actually covered by the NWD/SEP and a description of why 100 percent coverage is not feasible.

Describe the current status of this task:

In progress.

The existing ADRC partners cover 100% of the state however the existing partners do not have a physical presence in each town.

Describe experienced or anticipated challenges to completing this task:

CT anticipates a possible challenge providing access for individuals in more rural areas of the state, especially for individuals with significant disabilities.

Describe the State's plan to address the challenges described above:

CT plans to provide at least one NWD/SEP in each town, and outreach to cover the whole state.

4.2. Ensure NWD/SEPs are accessible to older adults and individuals with disabilities: States should indicate the features of the NWD/SEPs that promote accessibility, including wheelchair ramps, proximity to public transportation, bilingual staff, etc.

Describe the current status of this task:

This task is in progress. Existing ADRCs have accessible features. Each ADRC contract includes the following: "Provide efforts determined as reasonable by the Department to make the regional ADRC accessible to people with physical, cognitive, hearing and visual impairments and include the availability of home visits." The ADRCs also use the contractor known as "Languageline" for translation purposes. Each ADRC core operating partner is responsible to ensure that their agency is accessible to ADRC consumers (older adults, persons with disabilities, caregiver, and veterans), although this is not specifically described and interpreted differently in the different entities.

Describe experienced or anticipated challenges to completing this task:

We anticipate challenges with developing a common definition of accessibility which then will be implemented across the entire NWD system.

Describe the State's plan to address the challenges described above:

The State plans to hold stakeholder meetings to develop the definition of accessibility.

5. The NWD/SEP system includes an informative community LTSS website; Website lists 1-800 number for NWD/SEP network.

5.1. *Identify or develop URL:* Many States already have websites with information on community LTSS. If the State plans to use a website already in existence, it should submit the URL of that website.

Describe the current status of this task:

Completed URL for My Place CT: <a href="http://www.myplacect.org/">http://www.myplacect.org/</a>

URL for ConneCT: <a href="https://connect.ct.gov/access/">https://connect.ct.gov/access/</a>

Describe experienced or anticipated challenges to completing this task:

The challenge for MyPlaceCT was to come up with a URL and name that had not been already taken by another entity.

Describe the State's plan to address the challenges described above:

The State contracted with Mintz and Hoke, a company experienced in website development. They found various choices that would work and walked us through the choices so we could make an informed decision.

5.2. Develop and incorporate content: The State should incorporate additional information into its website as necessary. Once the website is completed, the State should submit the URL for CMS to review.

Describe the current status of this task:

The status of this task is in progress. CT has identified content from the ADRC website and from the state's existing Long Term Care website. Existing data is being housed together under one website: My Place CT. Additional information is being identified and added in phases.

Describe experienced or anticipated challenges to completing this task:

There is so much information that the biggest challenge is to present it in a user friendly manner.

Describe the State's plan to address the challenges described above:

The State has hired a contractor experienced in web site development.

5.3. Incorporate the Level I screen into the website (recommended, not required): If the State chooses to incorporate a Level I screening tool into its community LTSS website, it should submit the working URL of the tool, in addition to the instructions for users to complete the screen.

Describe the current st	tatue of this task:
Describe the current st	latus of this task.

Not started

Describe experienced or anticipated challenges to completing this task:
Describe the State's plan to address the challenges described above:
ngle 1-800 number where individuals can receive information about community LTSS options in
e State, request additional information, and schedule appointments at local NWD/SEPs for

6. Si th assessments.

6.1. Contract 1-800 number services: Many States already have 1-800 numbers for providing information on community LTSS. If the State plans to use a number already in existence, it should submit that phone number. If not, it must describe its method for developing or contracting a 1-800 number service and indicate when the number is functioning.

Describe the current status of this task:

This task is in progress. CT is determining whether or not to use an existing number, 211 Infoline.

Describe experienced or anticipated challenges to completing this task:

Contract considerations and upkeep of the information that is specific to individual communities will be the biggest challenges.

Describe the State's plan to address the challenges described above:

The state plans to build on existing resources and provide funding for additional librarians to keep the data up to date.

6.2. Train staff to answer phones, provide information, and conduct the Level I screen: NWD/SEP staff must be trained on how to provide information and conduct assessments in a standardized fashion. The State should submit related training materials and schedules.

Describe the current status of this task:

This task has not been started.

Describe experienced or anticipated challenges to completing this task:

The biggest challenge will be to ensure that the information provided is complete and the screen is performed uniformly throughout the various entities.

Describe the State's plan to address the challenges described above:

Comprehensive training and detailed instructions will be provided to the various entities.

## 7. State advertises the NWD/SEP system to help establish it as the "go to system" for community LTSS

7.1. Develop advertising plan: Nursing homes, hospitals, community-based organizations, medical providers, and other governmental social programs should be aware of and refer clients to the NWD/SEP system. Therefore, the State must develop and submit a plan for advertising the system to all potential referring partners.

Describe the current status of this task:

This task is already in progress. Appendix H includes an initial summary of the global communication plan. The full communication plan is scheduled for review the week of May 1.

Describe experienced or anticipated challenges to completing this task:

The expense of advertising is a challenge. There are multiple audiences representing different cultures and languages. Within the definition of culture, it is difficult to create a campaign that reaches across disability and aging within the same message.

Describe the State's plan to address the challenges described above:

CT will review the options and expenses of each advertising mode and will put its resources where it will get the most exposure for the cost. CT will also consider using current information distribution systems and lists, especially for contacting medical providers. In addition, focus groups will be used for messaging and a workgroup will be involved in the design, development and implementation.

7.2. *Implement advertising plan*: To indicate that the advertising plan has been implemented, States should submit related materials, such as posters and pamphlets.

Describe the current status of this task:

This task is already in progress.

Describe experienced or anticipated challenges to completing this task:

Anticipating the demand generated by the advertising and assuring supply both telephonically and physically with one to one counseling is a challenge.

Describe the State's plan to address the challenges described above:

CT plans to use the contractor's experience at estimating demand based on implementation of similar communication plans. Staffing patterns will be funded to assure adequate supply of people answering phones based on initial estimates. Back-up plans for telephonic assistance at the launch will also be developed to assure that calls are answered in a timely manner.

- 8. A CSA, which supports the purposes of determining eligibility, identifying support needs, and informing service planning, is used across the State and across a given population. The assessment is completed in person, with the assistance of a qualified professional. The CSA includes a CDS (a Core Data Set of required domains and topics).
  - 8.1. Develop questions for the Level I screen: The Level I screen should include a series of basic financial and functional questions that indicate whether a person may be eligible for Medicaid-funded community LTSS. States must identify and submit these questions. Many will submit a Level I screen already in use.

Describe the current status of this task:

In progress: Connecticut MFP staff currently use a level 1screen. (Appendix I contains the W-980 "Money Follows The Person" Application, which is used as the level 1 screen universally for all waivers.) This screen will be revised as part of the BIP so that the revised level 1 will directly inform the level 2 assessment thereby eliminating duplication of information collected and minimizing burden to the participant.

Describe experienced or anticipated challenges to completing this task:

CT's level 1 screen will be web based. Securing identifiable information will be a challenge.

Describe the State's plan to address the challenges described above:

Connecticut plans to implement a HIPAA compliant system.

8.2. Fill out CDS crosswalk to determine if State's current assessments include required domains and topics: Refer to Appendix H in the Manual for instructions on how to determine if the assessment already in use has all required domains and topics within the CDS. An electronic version of the CDS crosswalk can be found on the Balancing Incentive Program technical assistance website at: <a href="http://www.balancingincentiveprogram.org/resources/crosswalk-between-core-standardized-assessment-csa-and-core-dataset-cds">http://www.balancingincentiveprogram.org/resources/crosswalk-between-core-standardized-assessment-csa-and-core-dataset-cds</a>.

Describe the current status of this task:

REQUIRED: Completed All CT waiver managers, manager of behavioral health, Direct of Medicaid, VP of the Administrative Service Organization and UCONN staff, met for 5 days off site to: 1) review the cross walk (Appendix J: All cross walks) of existing Medicaid LTSS to the CMS core; 2) gain consensus on common definitions across programs; and 3) gain consensus on development and implementation of a common tool. UCONN is currently researching tools to find one that meets the needs of the state as defined by the report out at the meeting. Modules specific to certain target populations will be developed to complement the common core.

Describe experienced or anticipated challenges to completing this task:

While the crosswalk is completed for the existing system, continuing to navigate towards and implement a common tool will be challenging. The envisioned tool will cross multiple disability groups, waivers and departments. Coordinating and assuring buy-in will continue to be an important.

Describe the State's plan to address the challenges described above:

The joint workgroup of managers responsible for relevant programs across the state is a good first step regarding process. During the 5 day meeting and elevator speech was developed to assure messaging across the Department and to assist with staff communication. Getting input from consumers and from field staff will be important to implementation as we move ahead.

8.3. Incorporate additional domains and topics if necessary (stakeholder involvement is highly recommended):
Many States already use assessments that include all of the required domains and topics within the CDS. If not, the State should incorporate additional domains and topics using input from stakeholders. For the required deliverable, the State should submit the final assessment in addition to any materials that indicate stakeholder involvement.

Describe the current status of this task:

In progress: As previously mentioned, UCONN is working to identify existing tools that meet the needs of the State or alternatively the need to develop a new tool.

Describe experienced or anticipated challenges to completing this task:

In addition to challenges identified under section 8.3, the challenge of automating the tool within the State's MMIS and data sharing across the Departments will be addressed.

Describe the State's plan to address the challenges described above:

While the State has submitted 2 ADPs including BIP activities, a third may be necessary regarding integration of the CSA into the MMIS.

8.4. Train staff members at NWD/SEPs to coordinate the CSA: NWD/SEP staff must be trained to initiate and coordinate the collection of Level II assessments. This involves working with the clinical staff responsible for actually conducting the assessment and ensuring the assessment is completed in a timely fashion. Once again, States should submit training materials and schedules associated with this task.

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This task is not started.

Describe experienced or anticipated challenges to completing this task:

Timeliness of assessments can be a challenge due to capacity of clinical staff. Coordination responsibilities of NWD/SEP staff will be facilitated through the MyAccount's function where clinical staff will update individual accounts providing timely access to status information. Training for NWD staff relative to the MyAccount function will require technical learning objectives. A key challenge with NWD staff is standardization of outcomes so that Medicaid participants have a similar experience regardless of where they enter the system.

Describe the State's plan to address the challenges described above:

Capacity issues are currently addressed well through the state's Fee for Services model whereby the State contracts with non-state entities to provide as many assessments as possible. We are considering this as an option for our PCA Waiver and ABI Waiver. Non-state entities have more flexibility to hire staff to keep up with the number of assessments.

Training will be developed and implemented with quality oversight mechanisms for quarterly monitoring.

8.5. *Identify qualified personnel to administer the CSA:* States should submit a list of entities responsible for conducting the different portions of the assessment in addition to their qualifications, such as certification, education, or training.

Describe the current status of this task:

The State will use staff meeting the requirements as stated in the MFP operating protocol, State Plan, or 1915C waivers.

Describe experienced or anticipated challenges to completing this task:

None anticipated.

Describe the State's plan to address the challenges described above:

8.6. Regular updates: After the implementation of the CSA, States should submit brief semiannual reports with successes and challenges associated with the CSA.

Describe the current status of this task:

This task has not been started.

Describe experienced or anticipated challenges to completing this task:

No challenges are anticipated.

Describe the State's plan to address the challenges described above:

- 9. States must establish conflict of interest standards for the Level I screen, the Level II assessment and, the plan of care processes. An individual's plan of care must be created independently from the availability of funding to provide services.
  - 9.1. Describe current case management system: This description should identify areas of possible conflict in case management and systems the state currently has in place to mitigate those conflicts.

Describe the current status of this task:

REQUIRED: This task is complete. Areas of possible conflict have been identified. The DMHAS Waiver and State Plan Community Mental Health Services have been identified as the two areas that do not have conflict-free case management. See Appendix K: Conflict-Free Case Management Form.

Describe experienced or anticipated challenges to completing this task:

N/A

Describe the State's plan to address the challenges described above:

N/A

9.2. Establish protocol for removing conflict of interest: The state must also describe how it plans to ensure that community LTSS eligibility determination, enrollment, and case management processes are free of conflict of interest.

Describe the current status of this task:

This task has not been started. For the Mental Health Waiver and State Plan Community Mental Health Services, Connecticut will consider two tactics: 1) develop an administrative firewall for LMHAs and ABH to separate assessment and service functions to promote conflict-free case management for our mental health assessments and services and/or 2) develop a monitoring process through analysis of paid claims data. See Appendix K: Conflict-Free Case Management Form.

Describe experienced or anticipated challenges to completing this task:

Care plans for the State Plan Community Mental Health Services can be written by individual practitioners. It may not be possible to develop an administrative firewall to ensure conflict-free case management.

Describe the State's plan to address the challenges described above:

The State will also review the possibility of developing a monitoring process through analysis of paid claims data for State Plan Community Mental Health Services.

## 10. States must report service, outcome, and quality measure data to CMS in an accurate and timely manner.

10.1. Identify data collection protocol for service data: States should submit the sources for these data and/or the surveys that will be used to collect these data. As applicable, information should also include sampling and data collection protocols.

Describe the current status of this task:

REQUIRED: Completed - See Appendix L: Data Collection Form

Describe experienced or anticipated challenges to completing this task:

N/A

Describe the State's plan to address the challenges described above:

N/A

10.2. Identify data collection protocol for quality data: States should submit the sources for these data and/or the surveys that will be used to collect these data. As applicable, information should also include sampling and data collection protocols.

Describe the current status of this task:

REQUIRED: Completed – See Appendix L: Data Collection Form

Describe experienced or anticipated challenges to completing this task:

N/A

Describe the State's plan to address the challenges described above:

N/A

10.3. *Identify data collection protocol for outcome measures:* States should submit the sources for these data and/or the surveys that will be used to collect these data. As applicable, information should also include sampling and data collection protocols.

	Describe the current status of this task:
	REQUIRED: Completed – See Appendix L: Data Collection Form
	Describe experienced or anticipated challenges to completing this task:
	Describe the State's plan to address the challenges described above:
10.4	d. Report updates to data collection protocol and instances of service data collection: On a semiannual basis, States should submit any changes to their protocols for collecting service data, or any new instances of service data collection.
	Describe the current status of this task:
	This task has not been started.
	Describe experienced or anticipated challenges to completing this task:
	We do not anticipate any challenges.
	Describe the State's plan to address the challenges described above:
10.5	5. Report updates to data collection protocol and instances of quality data collection: On a semiannual basis, States should submit any changes to their protocols for collecting quality data, or any new instances of quality data collection.
	Describe the current status of this task:
	This task has not been started.
	Describe experienced or anticipated challenges to completing this task:
	We do not anticipate any challenges.
	Describe the State's plan to address the challenges described above:

10.6. Report updates to data collection protocol and instances of **outcomes measures** collection: On a semiannual basis, States should submit any changes to their protocols for collecting outcomes measures, or any new instances of outcomes measures collection.

Describe the current status of this task:
This task has not been started.
Describe experienced or anticipated challenges to completing this task:
We do not anticipate any challenges.
Describe the State's plan to address the challenges described above:

## 11. States should identify funding sources that will allow them to build and maintain the required structural changes.

11.1. Identify funding sources to implement the structural changes: Before building their systems, States must identify the sources of funding they will use to make these changes. States should submit information on the total cost of implementing the structural changes and the amount that each funding source will provide.

Describe the current status of this task:

REQUIRED: Complete. See Appendix M Funding Sources Table

Describe experienced or anticipated challenges to completing this task:

Legislative approval could provide a challenge.

Describe the State's plan to address the challenges described above:

Connecticut's Governor has identified rebalancing as a key objective, which helps garner legislative support.

11.2. Develop sustainability plan: States must also develop clear estimates of the cost to maintain the structural changes once they are in place. Therefore, States should submit the overall maintenance budget of the structural changes and anticipated sources of funding.

Describe the current status of this task:

In progress – Connecticut plans to maintain all structural changes as an integral component of the State's Medicaid Program. Overall maintenance budget is under development. Sources of funding include Health Insurance Technology (HIT) funds, state general revenue and Medicaid funds.

Describe experienced or anticipated challenges to completing this task:

No challenges are anticipated.

Describe the State's plan to address the challenges described above:

11.3. Describe the planned usage for the enhanced funding. The State must identify the projected amount of funding to be earned through the Program and describe how the State will use this enhanced funding by September 30, 2015. The State should also describe how the planned expenditures meet the following criteria: 1. Increase offerings of or access to non-institutional long-term services and supports; 2. Are for the benefit of Medicaid recipients; and 3. Are not a prohibited use of Medicaid funding.

Describe the current status of this task:

REQUIRED: Completed. Connecticut plans to use the BIP enhanced funding for expanded services. See Appendix N Enhanced Funding Usage.

Describe experienced or anticipated challenges to completing this task:

New service development often takes longer than anticipated.

Describe the State's plan to address the challenges described above:

Connecticut is already in advanced stages of planning with most new services.

## 12. States must make an effort to coordinate their NWD/SEP system with the Health Information Exchange IT system.

12.1. Describe plans to coordinate systems: This may include discussions with State Exchange IT system staff, the identification of key data fields that should be shared across the systems, and the development of a bridge between the systems.

Describe the current status of this task:

This task has been started. The Department developed an Advanced Planning Document to integrate DSS systems with the health exchange. Please see Appendix B containing the document, 'INTEGRATED ELIGIBILITY PROJECT – IMPLEMENTATION ADVANCE PLANNING DOCUMENT" which contains details on the project. From the document, "Connecticut endeavors to streamline eligibility determination and make its social services programs more accessible. Specifically, the state intends to achieve the following strategic objectives through its integrated eligibility initiative:

- Provide a "no wrong door" to all DSS programs. The platform will be extensible so that access to other non-DSS programs could be included in the future.
- Provide access to an up-to-date and integrated client record across all programs at each client touch point.
- Automate eligibility determination and rely on human intervention only when

requested by the client or required by program policy.

- Provide integrated online educational materials and online eligibility determination for all clients, including those with disabilities.
- Align eligibility processes to meet the needs and preferences of clients and front-line workers.
- Simplify eligibility rules, taking advantage of ACA and CMS changes where Connecticut State law allows.
- Improve the completeness, relevance, timeliness and accuracy of data collected and used for eligibility.
- Leverage Service Oriented Architecture (SOA) principles to develop an extensible architecture that will comply with CMS Medicaid Information Technology Architecture (MITA) and national standards for security, privacy, interoperability and information sharing.
- Leverage DSS's current IT Modernization project (MCSD) and Connecticut's statewide technology architecture and governance to streamline eligibility criteria and facilitate implementation of future rules changes.
- Manage eligibility criteria in a transparent and collaborative manner that allows for efficient and appropriate updates.
- Minimize dependence on specialized technical staff where possible."

Describe experienced or anticipated challenges to completing this task:

There are numerous changes, many with specific deadlines, which are being made simultaneously. Identifying the different projects and contacting the proper staff in a timely manner are big challenges.

Describe the State's plan to address the challenges described above:

The Department of Social Services has already contacted the staff responsible for the integration and plans to maintain contact and involvement throughout the process.

12.2. Provide updates on coordination: On a semiannual basis, States should report to CMS updates on coordination including new infrastructure developments.

Describe the current status of this task:

This task has not been started.

Describe experienced or anticipated challenges to completing this task:

No challenges are anticipated.

Describe the State's plan to address the challenges described above:

# STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES BIP WORK PLAN

The Work Plan should be signed by the lead of the State Medicaid Agency (the Oversight Agency) and by the Operating Agency (if those two agencies are different).

Signature of Lead of Operating Agency

Name:

Kate McEvoy, Esq.

Agency:

Department of Social Services

Position:

Interim Director of the Division of Health Services

Signature of Lead of Oversight Agency (Medicaid)

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Name:

Kate McEvoy, Esq.

Agency:

Department of Social Services

Position:

Interim Director of the Division of Health Services